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Atty Docket No. 16222U-012510US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Edwyn Labaze

Group Art Unit 2875

OFFICIAL COMMUNICATION
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CERTIFICATION OF FACSIMILE TRANSMISSION

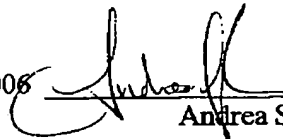
I hereby certify that the following documents in re Application of Paul Spaeth, Application No. 10/661,228, filed September 12, 2003 for METHOD AND SYSTEM FOR MANAGING TOKEN IMAGE REPLACEMENT are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal-1 Page
2. Petition for Extension of Time-In Duplicate
3. Amendment-6 Pages
4. Supplemental Information Disclosure Statement-3 Pages

Number of pages being transmitted, including this page: 13

Dated: June 13, 2006


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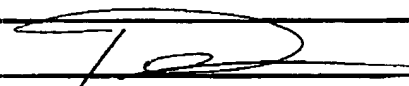
TOWNSEND and TOWNSEND and CREW LLP
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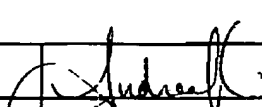
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PTO/SB/21 (09-14)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/661,228
	Filing Date	September 12, 2003
	First Named Inventor	Spaeth, Paul
	Art Unit	2876
	Examiner Name	Edwyn Labaze
Total Number of Pages in This Submission	Attorney Docket Number	16222U-012510US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Patrick R. Jewik		
Date	June 13, 2006	Reg. No.	40,456

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on June 13, 2006.		
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